

**MARIETTA HISTORIC BOARD OF REVIEW**  
**CERTIFICATE OF APPROVAL APPLICATION FOR EXTENSION OF EXISTING CHANGES**

Date: 3/16/2020 Applicant: Marietta Arts Council, Inc.  
Business Name: Thaicoon and Sushi Bar  
Address of Project Location: 34 Mill Street, Trailside wall  
Applicant's Mailing Address: 4 Depot Street  
Applicant's Phone Number: 678-527-9208

(Certificates of Approval are granted in accordance with the Marietta Comprehensive Development Code, Article 7-8-8, Historic District)

Certificate of Approval is sought for:

Exterior Paint X Exterior Repair \_\_\_\_\_ Exterior Remodeling \_\_\_\_\_  
Demolition \_\_\_\_\_ New Construction \_\_\_\_\_

**Brief description of project:** One year extension of current mural, "MARIETTA" to be approved until  
April 30, 2021. We will do some minor repairs and maintenance to fix faded  
areas.

Estimated Completion Date: N/A

**Please provide with your application:**

**The following information is required for new construction or demolition, including additions, or changes to the building façade. Please submit 20 COPIES with your application:**

- Building plans or proposed alterations and plans for re-use, if appropriate
- Plats drawn to scale and showing north arrow, district, land lot and parcel number, all property lines, location of buildings and other structures, creeks and easements, setback lines or other requirements indicating the areas for which the certificate is sought
- Photographs of existing building, if applicable

**For exterior paint, repair, remodeling and/or appurtenances, please submit 20 COPIES with your application:**

- Color samples of paint
- Sketch of exterior of building as it is now and with proposed changes
- Measurements of proposed changes
- Samples or detailed descriptions of materials to be used

Property Owner's Name: JTAD PARTNERSHIP  
Property Owner's Signature: Ashley Williams Date: 3/17/20  
Applicant's Signature: [Signature] Date: 3/19/20

**Return to:** **Sandra Lloyd, 205 Lawrence Street, Marietta, 30060 ph: 770-794-5669**  
**E-mail: slloyd@mariettaga.gov**

**CERTIFICATE OF APPROVAL**  
(To be completed by Historic Board of Review Chairperson)

Action of Historic Board of Review: Approved Denied

Variance or Stipulation: \_\_\_\_\_

Chairman: \_\_\_\_\_

Date Approved: \_\_\_\_\_



